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July 21, 2014

The Honorable Sherrod Brown
United States Senate
713 Hart Office Building
Washington, D.C., 20515

Dear Senator Brown,

On behalf of the Digestive Health Physicians Association (DHPA), a trade association comprised of independent gastroenterology practices from across the country that include more than 940 gastroenterologists and other physician specialists who last year treated more than 1.5 million patients, I am writing to express our strong support for your legislation, the "Removing Barriers to Colorectal Cancer Screening Act of 2014," (S. 2348).

Colorectal cancer screenings are among the most effective cancer-preventing tools in modern medicine, as the procedure can simultaneously involve diagnosis and treatment. It is critical that America's seniors have access to this lifesaving and cost-effective screening tool, regardless of whether they are Medicare patients or privately insured.

While routine diagnostic colonoscopy is covered by Medicare with no co-pay, a patient must render a co-pay if a polyp is detected and removed during the procedure. Understandably, this confuses patients and, even worse, may deter patients from undergoing the colonoscopy.

We applaud and support your efforts to eliminate this payment loophole that needlessly restricts patient access to this lifesaving screening procedure by requiring Medicare to cover both the routine screening and subsequent therapeutic procedure if a polyp is detected.

Colorectal cancer is the second-leading cause of cancer deaths in the United States among all adults and, [according to](#) the Centers for Disease Control (CDC), about one in three adults (23 million) aged 50 to 75 years have not been tested for colorectal cancer as recommended by the United States Preventive Services Task Force (USPSTF). Each year, more than 140,000 new cases of colorectal cancer are diagnosed, and approximately 50,000 preventable deaths



occur. Not only is the disease devastating to patients and their families, but treatment of colon cancer costs approximately \$14 billion per year. The CDC estimates that 60 percent of deaths could be avoided with screening. The disease is 90 percent curable when caught at its earliest state.

We applaud the efforts you have led to safeguard patient access to lifesaving colorectal cancer screening. We look forward to working with you as the bill progresses to final passage.

Scott R. Ketover, MD
DHPA President and Chairman of the Board